(ED-634fl [R]-g:Vormsi-Noms.-St.Elec.-Multi-Town Dist. Office-Endorsements-Forn Number Rev. 1/16)
To be filed with the SECRETARY OF THE STATE not later than $4 \mathrm{p} . \mathrm{m}$. on the fourteenth day after close of the convention (or if such fourteenth day is a Saturday, Sunday, or legal holiday, not later than $4 \mathrm{p} . \mathrm{m}$. on the next succeeding business day), in accordance with $\S \S 9-388$ and $9-2$ of the General Statutes. NOTE: This form is to be used only by the party-endorsed candidate for multi-town district office (ie, Representative in Congress; State Senator and State Representative from districts which cross town lines).


## CERTIFICATE OF PARTY ENDORSEMENT

At a convention of the delegates of the Republican Party for the [check ONE only; insert appropriate Congressional, Senatorial, or Assembly District Number]
$\square \underset{\text { (District number) }}{ }$ Congressional District
$\square$
$\xlongequal[\text { (District number) }]{\text { Probate District }}$

$A$ ${\underset{\text { (District number) }}{137 \mathrm{~A}} \text { Assembly District, }}_{\text {( }}$Senatorial District (District number)


II center street manchester at (location of convention) on the $\frac{1 \text { GTH }}{\text { (date) }}$ day of May, 2016,
I was endorsed by such convention as candidate for nomination to the office of [check ONE]Representative in Congress
State Senator
for said district, for the State Election to be held on November 8, 2016; and

## I authorize my name to appear on the ballot as printed or typed below:

 exactly the form in which you authorize it to appear on ballot)
Dated at MNNCHESTER , Connecticut, this 16 day of MAP $\qquad$ , 2016.


Signature of Chairman or Presiding Officer of Convention LOUIS A SPADACCINT

IMPORTANT: If this certificate, properly completed, is not received by the SECRETARY OF THE STATE by the deadline indicated above, the party shall be deemed to have made NO ENDORSEMENT OF ANY CANDIDATE for the office. ( $\S 9-388$ ) File with Secretary of the State, Legislation \& Elections Administration Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470.

To be filed with the SECRETARY OF THE STATE not later than 4 p.m. on the fourteenth day after close of the convention (or if such fourteenth day is a Saturday, Sunday, or legal holiday, not later than 4 p.m. on the next succeeding business day), in accordance with $\S \S 9-388$ and $9-2$ of the General Statutes. NOTE: This form is to be used only by the party-endorsed candidate for multi-town district office (i.e. Representative in Congress; State Senator and State Representative from districts which cross town lines).


## CERTIFICATE OF PARTY ENDORSEMENT

At a convention of the delegates of the Democratic Party for the [check ONE only; insert appropriate Congressional, Senatorial, or Assembly District Number]
held at 30 Bissell St, Manchester, CT on the 17th day of May, 2016, (location of convention) (date)
I was endorsed by such convention as candidate for nomination to the office of [check ONE]
$\square$ Representative in Congress $\square$ State Senator $\square$ State Representative
for said district, for the State Election to be held on November 8, 2016; and
I authorize my name to appear on the ballot as printed or typed below:

| Joe Diminico | 26 Finley St. | Manchester | 06040 |
| :---: | :---: | :---: | :---: |
| (Print or type name in exactly the form in which you | (Full Residence Address--Street) | (Town) | (Zip) |
| authorize it to appear on ballot) |  |  |  |

Dated at $\qquad$ Manchester, Connecticut this 17th day of $\qquad$ May , 2016.



Signature of Chaimman or Presiding Officer of Conyention

Charles Murray

OR
Signature of Secretary of Convention

IMPORTANT: If this certificate, properly completed, is not received by the SECRETARY OF THE STATE by the deadline indicated above, the party shall be deemed to have made NO ENDORSEMENT OF ANY CANDIDATE for the office. (§9-388) File with Secretary of the State, Legislation \& Elections Administration Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470.

